REQUEST

Address for correspondence: Mark this check-box where no agent or common representative is/has been appointed and the

space above is used instead to indicate a special address to which correspondence should be sent.

Pilkington, Stephanie Eric Potter Clarkson Park View House 58 The Ropewalk Nottingham NG1 5DD England

11			
	For receiving Office use only		
PCT			
	International Application No.		
REQUEST			
	International Filing Date		
The undersigned requests that the present international application be processed according to the Patent Cooperation Treaty.	Name of receiving Office and "PCT International Application"		
	Applicant's or agent's file reference (if desired) (12 characters maximum) BIOBY/ P32076PC		
Box No. 1 TITLE OF INVENTION VACCINE			
Box No. II APPLICANT This person i	s also inventor		
Name and address: (Family name followed by given name; for a legal entity, further address must include postal code and name of country. The country of the address is the applicant's State (that is, country) of residence if no State of residence is ind	ALEZZ MIGIETINE III IIIIZ I		
BioInvent International AB Sölvegatan 41	Facsimile No.		
S-223 70 Lund Sweden	Teleprinter No.		
	Applicant's registration No. with the Office		
State (that is, country) of nationality: SE	State (that is, country) of residence:		
This person is applicant all designated all designated for the purposes of: All designated all designated the United States all designated to the United States.	trates except the United States the States indicated in the Supplemental Box		
Box No. III FURTHER APPLICANT(S) AND/OR (FURTHER)	INVENTOR(S)		
Name and address: (Family name followed by given name; for a legal entity, The address must include postal code and name of country. The country of the a Box is the applicant's State (that is, country) of residence if no State of residence is independent.	DULEZZ MICHERICA III INIZ		
KIESSLING, Rolf	X applicant and inventor		
Rimmargatan 3 SE-167 71 Bromma	inventor only (If this check-box		
Sweden	is marked, do not fill in below)		
	Applicant's registration No. with the Office		
State (that is, country) of nationality: SE	State (that is, country) of residence:		
This person is applicant all designated all designated for the purposes of: States all designated the United State			
X Further applicants and/or (further) inventors are indicated on a cont	inuation sheet.		
Box No. IV AGENT OR COMMON REPRESENTATIVE; OR A	ADDRESS FOR CORRESPONDENCE		
The person identified below is hereby/has been appointed to act on behalf of the applicant(s) before the competent International Authorities as:	X agent common representative		
Name and address: (Family name followed by given name; for a legal entity, fit The address must include postal code and name of country.)	Il official designation. Telephone No. (0115) 9552211		
Pilkington, Stephanie Eric Potter Clarkson	Facsimile No. (0115) 9552201		
Park View House 58 The Ropewalk Nottingham	Teleprinter No. 37540 Potter G		
NGI 5DD	Agent's registration No. with the Office		

Sheet No2			
THE THE PARTY OF T	VTOR(S)		
Continuation of Box No. III FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)			
If none of the following sub-boxes is used, this sheet should not be included in the request.			
Name and address: (Family name followed by given name; for a legal emity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)	This person is: applicant only		
HOLMGREN, Lars Snäckvägen 14 SE-167 53 Bromma	X applicant and inventor		
Sweden	inventor only (If this check-box is marked, do not fill in below)		
	Applicant's registration No. with the Office		
State (that is, comm	y) of residence: SE		
State (that is, country) of nationality: SE State (mai is, country)			
This person is applicant for the purposes of: all designated States all designated States the United States of America	the United States of America only the Supplemental Box		
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)	This person is applicant only applicant and inventor inventor only (If this check-box is marked, do not fill in below)		
	Applicant's registration No. with the Office		
State (that is, country) of nationality: SE State (that is, country)	or residence: SE		
This person is applicant all designated States all designated States except the United States of America	the United States of America only the States indicated in the Supplemental Box		
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)	This person is applicant only applicant and inventor inventor only (If this check-box is marked, do not fill in below) Applicant's registration No. with the Office		
State (that is, count	ry) of residence:		
State (that is, country) of nationality:	·		
This person is applicant all designated States all designated States except the United States of America	the United States the States indicated in		
for the purposes of:	of America only the Supplemental Box		
for the purposes of: Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Bax is the applicant's State (that is, country) of residence if no State of residence is indicated below.)	This person is applicant only applicant and inventor inventor only (If this check-box is marked, do not fill in below) Applicant's registration No. with the Office		
for the purposes of. Name and address: (Family name followed by given name; for a legal entity, full official designation. The country of the address indicated in this	This person is applicant only applicant and inventor inventor only (If this check-box is marked, do not fill in below) Applicant's registration No. with the Office		

Further applicants and/or (further) inventors are indicated on another continuation sheet.

CORRECTION OF INVENTORSHIP

PCT application PCT/EP2004/014573 "VACCINE", claiming priority from G 0330079.5, was filed 20 December 2004 in the name of BioInvent International AB naming

Rolf KIESSLING, Lars HOLMGREN and Lena-Maria CARLSON

as inventors.

We, the undersigned, herewith agree to and confirm that Lena-Maria CARLSON is <u>not</u> one of the inventors and that the inventorship should be corrected accordingly.

Date:

Signature	Rolf Klessling 05 VI 2/
Place: Signature	Date: Lars HOLMGRIN
Place:	Date:
Signature_	Lena-Maria CARLSON

Sheet No ..2.. FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S) Continuation of Box No. III If none of the following sub-boxes is used, this sheet should not be included in the request. Name and address: (Family name followed by given name; for a legal entity, full official designation. This person is: The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.) applicant only HOLMGREN, Lars X applicant and inventor Snäckvägen 14 SE-167 53 Bromma inventor only (If this, check-box is marked, Sweden do not fill in below) Applicant's registration No. with the Office State (that is, country) of residence: SE State (that is, country) of nationality: SE the States indicated in the United States all designated States except the Supplemental Box This person is applicant of America only all designated States the United States of America for the purposes of: Name and address: (Family name followed by given name; for a legal entity, full official designation. This person is The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.) applicant only CARLSON, Lena-Maria X applicant and inventor Lodvägen 12, II SE-192 59 Sollentuna inventor only (If this check-box is marked, do not fill in below) Sweden Applicant's registration No. with the Office State (that is, country) of residence: SE State (that is, country) of nationality: SE the United States the States indicated in all designated States except This person is applicant the Supplemental Box all designated States of America only the United States of America for the purposes of: Name and address: (Family name followed by given name; for a legal entify, full official designation. This person is The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.) applicant only applicant and inventor inventor only (If this check-box is marked, do not fill in below) Applicant's registration No. with the Office State (that is, country) of residence: State (that is, country) of nationality: the States indicated in the Supplemental Box the United States all designated States except This person is applicant all designated States of America only the United States of America for the purposes of: Name and address: (Family name followed by given name; for a legal entity, full official designation. This person is The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is country) of residence if no State of residence is indicated below.) applicant only applicant and inventor inventor only (If this check-box is marked, do not fill in below) Applicant's registration No. with the Office State (that is, country) of residence: State (that is, dountry) of nationality: the United States the States indicated in all designated States except This person is applicant all designated States the Supplemental Box of America only the United States of America for the purposes of: Further applicants and/or (further) inventors are indicated on another continuation sheet.

Form PCT/RO/101 (continuation sheet) (January 2004)

See Notes to the request form

		Sheet No3	<u> </u>	
Box No. V DESIGNATIONS:		0.11.0	ates hound by the PCT on t	the international filing date,
Box No. V DESIGNATIONS: The filing of this request constitutes un for the grant of every kind of protection a	der Rule 4.9(a), the design vailable and, where applicab	lation of all Contracting Sur le, for the grant of both region	onal and national patents.	
However, DE Germany is not designated fo	r any kind of national protect	tion		
KR Republic of Korea is not design	gnated for any kind of nation	al protection		•
RU Russian Federation is not desi				
(The check-boxes above may be used to e the national law, of an earlier national a such national law provisions in these and	xclude (irrevocably) the desi	deres severand in order	to avoid the ceasing of the G Box No. V as to the conseque	effect, under ences of
Box No. VI PRIORITY CLAIM:		·		<u> </u>
The priority of the following earlier appli				
The priority of the fenewing current			Where earlier application i	s:
Filing date of earlier application (day/month/year)	Number of earlier application	national application: country or Member of WTO	regional application:* regional Office	international application: receiving Office
item (1) 20 December 2003	0330079.5	GB		
item (2)				
item (3)				
Further priority claims are indicated	ted in the Supplemental Box.			
The receiving Office is requested to prepare the earlier application was filed with the all items	pare and transmit to the Interest Office which for the purpose item (1)	national Bureau a certified constant of this international application (2) it	tem (3) of	ther, see Supplemental Box
* Where the earlier application is an a Property or one Member of the World T	rade Organization for which	tital carrier approximation		
THE PROPERTY OF THE PARTY OF TH	SEARCHING AUTHORI	ГУ		
Choice of International Searching Asearch, indicate the Authority chosen; ti	uthority (ISA) (if two or me	ore International Searching	Authorities are competent	to carry out the internationa
70.47				
Request to use results of earlier searc	h; reference to that search	(if an earlier search has beei	n carried out by or requeste	d from the International
Searching Authority): Date (day/month/year)	Number		or regional Office)	
Box No. VIII DECLARATIONS				
The following declarations are contain check-boxes below and indicate in the r	agni column ine number oj el	ich type of mean and ty	-	Number of declarations
Box No. VIII (i) Declaratio	n as to the identity of the inv	entor	•	
date, to ap	n as to the applicant's entitle ply for and be granted a pate	nt		
date, to cla	n as to the applicant's entitle aim the priority of the earlier	application		
Box No. VIII (iv) Declaration States of A	n of inventorship (only for th America)	e purposes of the designation	n of the United :	

Declaration as to non-prejudicial disclosures or exceptions to lack of novelty

Box No. VIII (v)

Sheet	BT -	4
Sheet	INO	4.

Box No. IX CHECK LIST; LANGUAGE OF I	FILING	
This international application contains:	Train international application is accompanied by the following	Number
(a) in paper form, the following number of	item(s) (mark the applicable check-boxes below and indicate in right column the number of each item):	of items
sheets:		
request (including	1. fee calculation sheet	:
declaration sheets) : 4	2. original separate power of attorney	:
description (excluding 49	3. original general power of attorney	:
sequence listings and /or tables related thereto):	4. copy of general power of attorney; reference number, if any:	
claims 3	5. statement explaining lack of signature	•
abstract : 1	ariority document(s) identified in Box No. VI as	:
drawings : 13	item(s):	:
Sub-total number of sheets 70	7. translation of international application into (language)	
sequence listings tables related thereto 0	separate indications concerning deposited microorganism	n :
(for both, actual number of sheets if filed in paper form,	or other biological material 9. sequence listing in computer readable form	:
whether or not also filed in	(indicate type and number of carriers)	
computer readable form; see (c) below)	(i) copy submitted for the purposes of international search Rule 13ter only (and not as part of the international ap	n under oplication) :
Total number of sheets 70	(ii) (anh) where check-hox (h)(i) or (c)(i) is marked in left	column)
(b) only in computer readable form (Section 801(a)(i))	additional copies including, where applicable, the copies purposes of international search under Rule 13ter	y for the
(i) sequence listing	(iii) together with relevant statement as to the identity of the or copies with the sequence listing mentioned in left c	ne copy
(ii) tables related thereto (c) also in computer readable form	10 Tables in computer readable form related to sequence list	tings :
(Section 801(a)(ii))	(indicate type and number of carriers)	h under
(i) sequence listing (ii) tables related thereto	Section 802(b-quater) only (and not as part of the inte	rnational :
Type and number of carriers (diskette,	application) (ii) (only where check-box (b)(ii) or (c)(ii) is marked in le	fi column)
CD-ROM, CD-R or other) on which are contained the	additional copies including, where applicable, the coppurposes of international search under Section 802(b-	ואַ זטו נווכ
sequence listing	- in the identity	of the copy
tables related thereto:	or copies with the tables mentioned in left column	
	11. other (Specify)	
Figure of the drawings which	Language of filing of the international application: English	
should accompany the abstract:	TO THE PERSON OF	
Box No. X SIGNATURE OF AFFLICANT, AGENT Next to each signature, indicate the name of the person sig the request)	FOR COMMON REPRESENTATIVE ming and the capacity in which the person signs (if such capacity	is not obvious from readin
•	Stephanie	Pilkington
	For Receiving Office use only	
	· .	2. Drawings
 Date of actual receipt of the purported international application: 	· _	received
іптегнаціонаі аррисаціон.		
 Corrected date of actual receipt due to later but timely received papers or drawings completing the purported international application: 		not received
Date of timely receipt of the required corrections under PCT Article 11(2):		
International Searching Authority ISA/ (if two or more are competent):	6. Transmittal of search copy delayed until search fee is paid	
	For International Bureau use only	
Date of receipt of the record copy	•	
by the international Bureau:		0
2004)		See Notes to request for